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PTO/SB/21 (08-00)

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>Application Number</b>	10/577,471		
	<b>Filing Date</b>	April 27, 2006	
	<b>First Named Inventor</b>	Yuji IWAKI et al.	
	<b>Group Art Unit</b>	1794	
	<b>Examiner Name</b>	Michael Wilson	
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	0756-7673

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosures 1. 2. 3. 4. 5. 6.
<b>Remarks</b> <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50- 2280 for the above identified docket number.		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

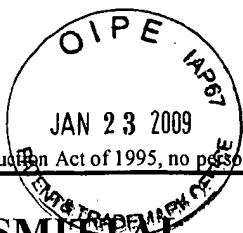
<b>Firm or Individual name</b>	Eric J. Robinson, Reg. No. 38,285 Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, VA 20165
<b>Signature</b>	
<b>Date</b>	January 21, 2009

## CERTIFICATE OF MAILING

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**FEE TRANSMITTAL  
FOR FY 2009**

Effective 10/02/2008. Patent fees are subject to annual revision.

☐ Applicant Claims small entity status. See 37 CFR 1.27.**TOTAL AMOUNT OF PAYMENT** (\$) 460.00**Complete if Known**

Application Number	10/577,471
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First Named Inventor	Yuji IWAKI et al.
Examiner Name	Michael Wilson
Group Art Unit	1794
Attorney Docket No.	0756-7673

**METHOD OF PAYMENT**

- 1.
- ☐
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit  
Account  
Number

50-2280

Deposit  
Account  
NameRobinson Intellectual Property  
Law Office

- ☒
- Charge Any Additional Fee Required
- 
- Under 37 CFR 1.16 and 1.17 and
- 
- credit overpayments

☐ Applicant claims small entity status.  
See 37 CFR 1.27

- 2.
- ☒
- Payment Enclosed:

☒ Check ☐ Credit Card ☐ Money  
Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
1001	2001	330	165	Utility filing fee	
1111	2111	540	270	Search fee	
1311	2311	220	110	Examination fee	
Over 100 Sheets/270 for each additional 50					

**SUBTOTAL (1)****2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
	-20** =	\$52	
Independent Claims	-3** =	\$220	
Multiple Dependent			

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
1202	2202	52	26	Claims in excess of 20	
1201	2201	220	110	Independent claims in excess of 3	
1203	2203	390	195	Multiple dependent claim, if not paid	
1204	2204	220	110	** Reissue independent claims over original patent	
1205	2205	52	26	** Reissue claims in excess of 20 and over original patent	

**SUBTOTAL (2)**

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65 Surcharge - late filing fee or oath	
1052	50	2052	25 Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130 Non-English specification	
1812	2,520	1812	2,520 For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920* Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840* Requesting publication of SIR after Examiner action	
1251	130	2251	65 Extension for reply within first month	\$460.00
1252	490	2252	245 Extension for reply within second month	
1253	1,110	2253	555 Extension for reply within third month	
1254	1,730	2254	865 Extension for reply within fourth month	
1255	2,350	2255	1,175 Extension for reply within fifth month	
1401	540	2401	270 Notice of Appeal	
1402	540	2402	270 Filing a brief in support of an appeal	
1403	1,080	2403	540 Request for oral hearing	
1451	1,510	1451	1,510 Petition to institute a public use proceeding	
1452	540	2452	270 Petition to revive - unavoidable	
1453	1,620	2453	810 Petition to revive - unintentional	
1501	1,510	2501	775 Utility issue fee (or reissue)	
1502	860	2502	430 Design issue fee	
1503	1,190	2503	595 Plant issue fee	
1462	400	1462	400 Petitions, Group I	
1463	200	1463	200 Petition, Group II	
1464	130	1464	130 Petitions, Group III	
1807	50	1807	50 Processing fee under 37 CR 1.17(q)	
1806	180	1806	180 Submission of Information Disclosure Stmt	
8021	40	8021	40 Recording each patent assignment per property (times number of properties)	
1809	810	2809	405 Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	810	2810	405 For each additional invention to be examined (37 CFR § 1.129(b))	
1801	810	2801	405 Request for Continued Examination (RCE)	
1802	900	1802	900 Request for expedited examination of a design application	
Other fee (specify) _____				

\* Reduced by Basic Filing Fee Paid

**SUBTOTAL (3)** \$ 460.00**CERTIFICATE OF MAILING/TRANSMISSION**

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*Adrian Stanger***SUBMITTED BY**

Name (Print/Type) Eric J. Robinson

Signature

Registration No.  
(Attorney/Agent)

38,285

**Complete (if applicable)**

Telephone (571) 434-6789

Date January 21, 2009